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CONFIRMATION NO. 1536

|                                                                                                                                                                                                                                                                                                                           |                                                                                                                   |                                   |                                                                                                                                                                                                                                                                                   |                                               |
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| <b>SERIAL NUMBER</b><br>10/775,738                                                                                                                                                                                                                                                                                        | <b>FILING OR 371(c) DATE</b><br>02/09/2004<br><b>RULE</b>                                                         | <b>CLASS</b><br>600               | <b>GROUP ART UNIT</b><br>3736                                                                                                                                                                                                                                                     | <b>ATTORNEY DOCKET NO.</b><br>087916-000000US |
| <b>APPLICANTS</b><br>Ming-Jeng Shue, Taichung City, TAIWAN;<br>Deborah Huang, Taichung City, TAIWAN;<br>Phillip Shue, Taichung City, TAIWAN;                                                                                                                                                                              |                                                                                                                   |                                   |                                                                                                                                                                                                                                                                                   |                                               |
| <b>** CONTINUING DATA *****</b><br><br><b>** FOREIGN APPLICATIONS *****</b><br>TAIWAN 92131220 11/07/2003                                                                                                                                                                                                                 |                                                                                                                   |                                   |                                                                                                                                                                                                                                                                                   |                                               |
| <b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY **</b><br>** 05/10/2004                                                                                                                                                                                                                                     |                                                                                                                   |                                   |                                                                                                                                                                                                                                                                                   |                                               |
| Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no<br>35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after<br>met<br>Verified and Acknowledged <i>[Signature]</i> Allowance<br>Examiner's Signature Initials |                                                                                                                   | <b>STATE OR COUNTRY</b><br>TAIWAN | <b>SHEETS DRAWING</b><br>21                                                                                                                                                                                                                                                       | <b>TOTAL CLAIMS</b><br>17                     |
| <b>INDEPENDENT CLAIMS</b><br>1                                                                                                                                                                                                                                                                                            |                                                                                                                   |                                   |                                                                                                                                                                                                                                                                                   |                                               |
| <b>ADDRESS</b><br>20350                                                                                                                                                                                                                                                                                                   |                                                                                                                   |                                   |                                                                                                                                                                                                                                                                                   |                                               |
| <b>TITLE</b><br>Cannula retractable medical collection device                                                                                                                                                                                                                                                             |                                                                                                                   |                                   |                                                                                                                                                                                                                                                                                   |                                               |
| <b>FILING FEE RECEIVED</b><br>385                                                                                                                                                                                                                                                                                         | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |                                   | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other : _____<br><input type="checkbox"/> Credit |                                               |